

CPA Food Package Unit



Resources & Job Aides

The WIC Food Package

Nutrition Delivered

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a very important source of nutritious foods and nutrition education for many low-income pregnant women, new mothers, infants and children up to age five in low-income families. The program provides a monthly package of WIC checks that can be used in the grocery store to buy specific foods.

The food package today contains many of the same foods as it did when the program started in Nebraska in 1975 and was designed to supplement diets with foods rich in five nutrients known to be lacking: Vitamin A, vitamin C, calcium, iron and protein.

- Iron fortified cereals
- 100% fruit juice
- Milk
- Cheese
- Dried beans or peanut butter
- Eggs
- Iron fortified infant formula

Since the program started there has been an explosion of knowledge related to nutrition and health, as well as a growing obesity problem in this country. In 2009 the WIC food packages were revised based on the recommendations of the Institute of Medicine, the latest nutrition science, the 2005 Dietary Guidelines and the American Academy of Pediatrics. The revised food package provides more whole grains, more fiber, less saturated fat, supports breastfeeding and delays the introduction of solids for infants until 6 months of age. Changes include:

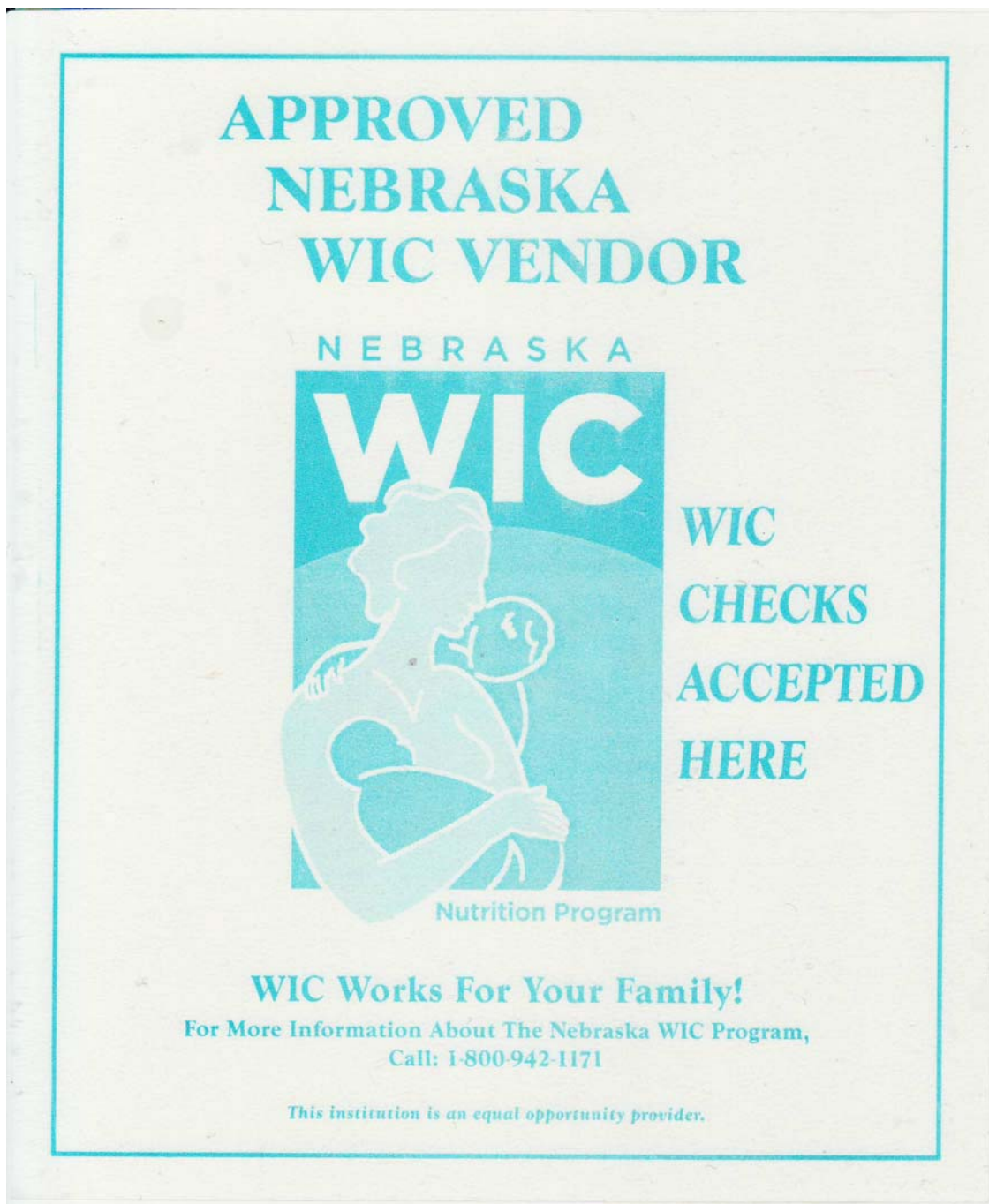
- The addition of fresh fruits and vegetables
- The addition of 100% whole wheat bread or brown rice
- The addition of baby food fruits and vegetables for all infants at 6 months
- The addition of baby food meat for breastfed babies.
- An option to substitute canned beans in place of dry beans
- An option to substitute soy beverage for milk
- And more foods for fully breastfeeding mothers and their babies

Today, WIC serves over 9.2 million nationwide. In Nebraska the average monthly participation on WIC is over 45,000.

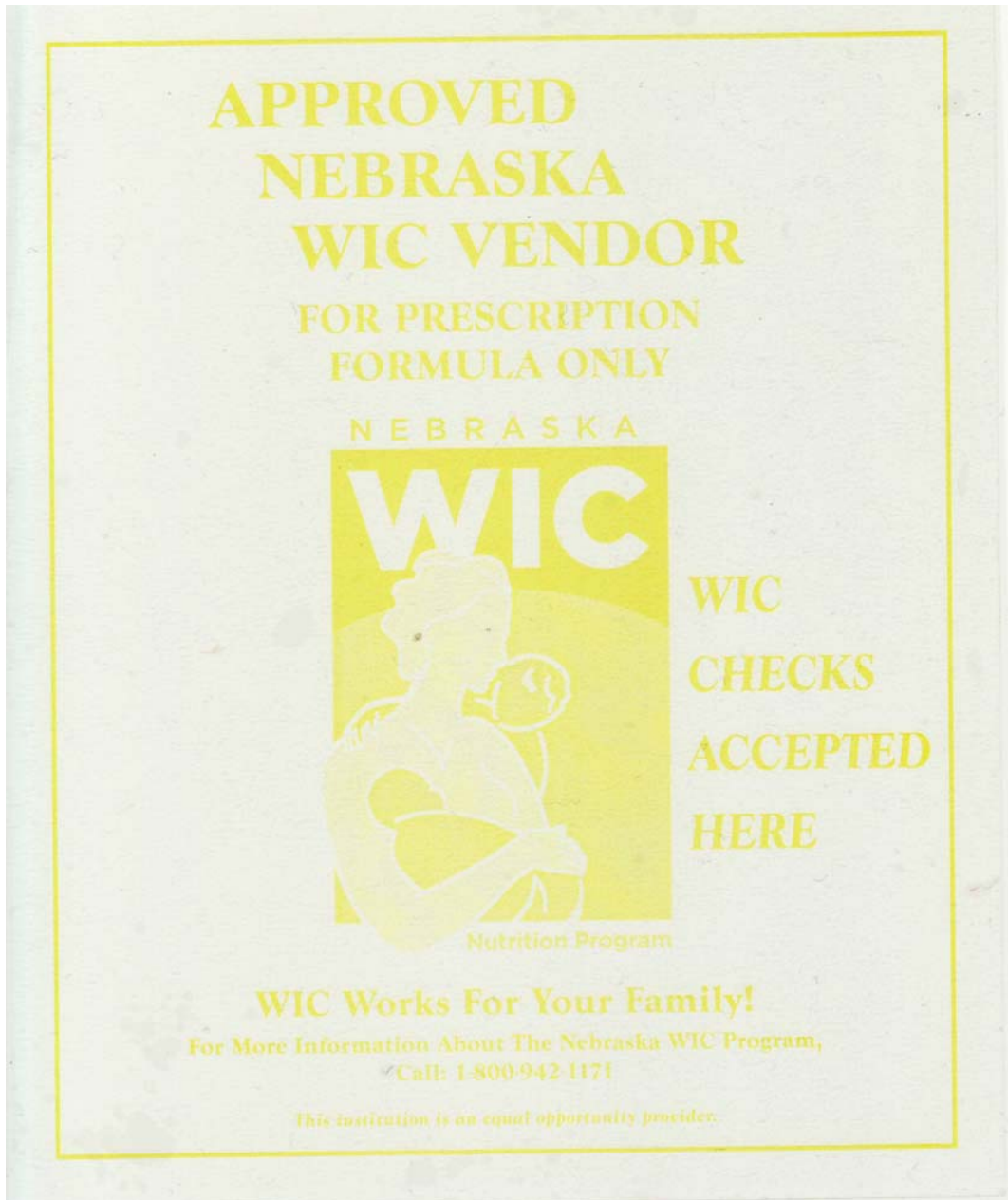
November 2009



Grocery Store – Window Sticker



Special Purchase Store / Pharmacy – Window Sticker



These stores are only authorized to accept WIC checks for “special formulas” and or “medical formulas”.

They are not authorized to accept checks for contract formulas or WIC foods.

Store Shelf Label



Sample label

Client Status Chart

F1 – Use Help Screen

	COMPUTER CODE	DEFINITION
INFANT & 1 year old	IBF	Infant Breastfed - FULLY or MOSTLY (0-12 months)
	IPB	Infant Breastfed - SOME (0-12 month)
	IFF	Infant Formula Fed - NO breastfeeding (0-12 months)
	CH1	Child 1 year (12-23 months)
CHILD	CH2	Child 2 years (24-35 months)
	CH3	Child 3-4 years (36-59 months)
PREGNANT	PGT	Pregnant teen age 17 or <
	PGW	Pregnant woman, age 18 or >
DELIVERED	BF1	Teen or woman - FULLY or MOSTLY breastfeeding an infant that is 0-12 months old.
	BF2	Woman or teen - SOME breastfeeding an infant 0-12 months old.
	PPT	Teen, age 17 or < - whose infant is less than 6 months of age & is NOT breastfeeding
	PPW	Woman - whose infant is less than 6 months old & is NOT breastfeeding

Breastfeeding Definitions

Fully Breastfeeding	Infant is fed breastmilk for <i>all feedings</i> Infant does not receive WIC formula
Mostly Breastfeeding	Infant is fed breastmilk for <i>nearly all feedings</i>
Some Breastfeeding	Infant is fed breastmilk <i>at least 1 time per day</i>

Woman's Food Package - Fully Breastfeeding



Cereal - 36 ounces



Eggs - 2 dozen
(medium or large)



Juice - 3 containers
(frozen or concentrate)

At the Store - Pick 2



Peanut Butter - 18 oz jar
Dried Beans - 1 lb
Canned Beans - 4 cans

At the Store - Pick 1



Brown Rice - (14-16 oz bag or box)
100% Whole Wheat Bread - 1 lb loaf



Tuna or Salmon
- 30 ounces



Fruits & Vegetables
\$10 check

Milk - 6 gallons &
Cheese - 1 lb

OR

Milk - 5 gallons &
Cheese - 2 lb



EF1



EF2

New Food Pig Training - Aug 2009
Effective 10/1/09

Woman's Food Package - Mostly Breastfeeding



Cereal - 36 ounces



Eggs - 1 dozen
(medium or large)



Juice - 3 containers
(frozen or concentrate)

At the store - PICK 2



Peanut Butter - 18 oz jar
Dried Beans - 1 lb
Canned Beans - 4 cans

At the store - PICK 1



Brown Rice - (14-16 oz bag or box)
100% Whole Wheat Bread - 1 lb loaf



Fruits & Vegetables
\$10 check

Milk - 5 ½ gallons
Cheese - NONE

OR

Milk - 4 ½ gallons
Cheese - 1 lb



MF1



MF2

Effective 2/1/10
F/V check increase to \$10

Woman's Food Package - Some Breastfeeding



Cereal - 36 ounces



Eggs - 1 dozen
(medium or large)



Juice - 2 containers
(frozen or concentrate)

At the store - PICK 1



Peanut Butter - 18 oz jar
Dried Beans - 1 lb
Canned Beans - 4 cans



Fruits & Vegetables
\$10 check

Milk - 4 gallons
(Cheese - NONE)

OR

Milk - 3 gallons
Cheese - 1 lb



SF1



Effective 2-1-10
F/V check increase to \$10 for women

Woman's Food Package - Postpartum



Cereal - 36 ounces



Eggs - 1 dozen
(medium or large)



Juice - 2 containers
(frozen or concentrate)

At the store - PICK 1



Peanut Butter - 18 oz jar
Dried Beans - 1 lb
Canned Beans - 4 cans



Fruits & Vegetables
\$10 check

Milk - 4 gallons
Cheese - NONE

OR

Milk - 3 gallons &
Cheese - 1 lb



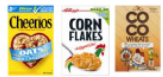
DF1



DF2

Effective 2-1-10
F/V check for women increase to \$10

Woman's Food Package - Pregnant



Cereal - 36 ounces



Eggs - 1 dozen
(medium or large)



Juice - 3 containers
(frozen or concentrate)

At the store - PICK 2



Peanut Butter - 18 oz jar
Dried Beans - 1 lb
Canned Beans - 4 cans

At the store - PICK 1



Brown Rice - (14-16 oz bag or box)
100% Whole Wheat Bread - 1 lb loaf



Fruits & Vegetables
\$10 check

OR

Milk - 5 $\frac{1}{2}$ gallons
Cheese - NONE



PF1

Milk - 4 $\frac{1}{2}$ gallons
Cheese - 1 lb



PF2

Effective 2/1/10 - increase FN check to \$10 for women

Child's Food Package



Cereal - 36 ounces



Eggs - 1 dozen
(medium or large)



Juice - 2 bottles
(64 oz plastic)

At the store - PICK 1



Peanut Butter - 18 oz jar
Dried Beans - 1 lb
Canned Beans - 4 cans

At the store - PICK 2



Brown Rice - 1 lb bag or box
100% Whole Wheat Bread - 1 lb loaf



Fruits & Vegetables
\$6 check

Milk - 4 gallons &
No cheese

TF1



CF1

OR

Milk - 3 gallons &
Cheese - 1 lb

TF2



CF2

T pkg - 1 year old - whole Milk

C pkg - 2-4 year old - Skim, 1%, or 2%

New Food Pkg Training - Aug 2009
Effective 10/1/09

**100 – 200- 300
Formula Fed**

- 100 – 0-3 months; youngest
- 200 – 4-5 months; middle
- 300 – 6-12 months; oldest

1st Digit – INFANTS

- First digit will be a number
- Number tells you 2 things
 - Status
 - Age

3rd Digit – Infants

Quantity

- F = full package (ie. 1AF)
Or
- # of Cans (ie. 8A3)

**400 – 500 - 600
Some BF**

- 400 – 0-3 months; youngest
- 500 – 4-5 months; middle
- 600 – 6-12 months; oldest

1st Digit – INFANTS

- 100/200/300 – formula Fed
- 400/500/600 – Some BF
- 700/800/900 – Mostly BF

2nd Digit – Infants

- Type of formula
- Is a letter
- Letter corresponds to food package cheat sheet

**700 – 800 - 900
MOSTLY BF**

- 700 – 0-3 months; youngest
- 800 – 4-5 months; middle
- 900 – 6-12 months; oldest

B =

Fully BF Baby

- BFG – 0-3 mo (no food)
- BF4 – 4-5 mo (no food)
- BFF – 6-12 mo (+food)
- BF6 – 6-12 mo (no food)

1st Digit – Women & Children

- T – Toddler
- C – Child
- P – Pregnant
- E – Fully (Exclusive) BF
- M – Mostly BF
- S – Some BF
- D – Delivered (PP)

Types of Milk Substitutions – 2nd Digit:

- A – Acidophilus
- B – Buttermilk
- D – Dry milk
- E – Evaporated milk
- S – Soy Milk
- 1 – Standard pkg (no sub)
- 2 – with Cheese sub.

2nd Digit – Women & Children

- Type of food package
 - F – Full Standard package
- Or
- Type of milk substitution

- 3rd Digit – Women & Children**
- 1 – Standard package
 - 2 – package with extra cheese

Food Package Numbering Cards

Coding System

Print 4 pg/ sheet (properties)
(options) reverse order for notebook pages

Common Food Packages

Fully Breastfeeding - BF1	
6 Milk/1 Cheese	EF1
5 Milk/2 Cheese	EF2

Mostly Breastfeeding - BF1	
5 $\frac{1}{2}$ milk/0 Cheese	MF1
4 $\frac{1}{2}$ Milk/1 Cheese	MF2

Some Breastfeeding - BF2	
4 Milk/0 Cheese	SF1
3 Milk/1 Cheese	SF2

Pregnant - PGW/PGT	
5 $\frac{1}{2}$ milk/0 Cheese	PF1
4 $\frac{1}{2}$ Milk/1 Cheese	PF2

Postpartum - PPW/PPT	
4 Milk/0 Cheese	DF1
3 Milk/1 Cheese	DF2

Fully Breastfed Infants - IBF	0-3 months	4-5 month	6-12 month pkg
Fully BF - Breastmilk	BFG	BF4	BFF Cereal & Baby Food

Formula Fed Infants - IFF	Formula Only Package 0-3 months	Formula Only Package 4-5 month	6-12 month pkg with cereal & baby food
Enfamil LIPIIL 12.9 oz pwd	1AF	2AF	3AF
Enfamil LIPIIL 13 oz conc	1BF	2BF	3BF
Prosobee/Enfamil Soy LIPIIL 12.9 oz pwd	1HF	2HF	3HF
Prosobee/Enfamil Soy LIPIIL 13 oz conc	1IF	2IF	3IF
Gentlease 12 oz pwd	1GF	2GF	3GF

Toddler 1 yr - CH1	
4 Milk/0 Cheese	TF1
3 Milk/1 Cheese	TF2

Child 2-4 yr - CH2 or CH3	
4 Milk/0 Cheese	CF1
3 Milk/1 Cheese	CF2

Food Package Numbers for Children and Women

Effective October 1, 2009

	1 year old Children	2-5 year old Children	Pregnant	<u>FULLY</u> BF	<u>MOSTLY</u> BF	<u>SOME</u> BF	Postpart
STATUS	CH1	CH2	PGW	BF1	BF1	BF2	PPW
	TODDLER	CHILDREN	PREGNANT	FULLY	MOSTLY	SOME	DELIVERED
First digit of food pkg is . . .	T	C	P	E	M	S	D
Standard	TF1	CF1	PF1	EF1	MF1	SF1	DF1
Standard 1# cheese	TF2	CF2	PF2	EF2	MF2	SF2	DF2
Acidoph	TA1	CA1	PA1	EA1	MA1	SA1	DA1
Acidoph 1# cheese	TA2	CA2	PA2	NA	MA2	SA2	DA2
Buttermilk	NA	NA	PB1	EB1	MB1	SB1	DB1
Dry	NA	NA	PD1	ED1	MD1	SD1	DD1
Evaporated	NA	NA	PE1	EE1	ME1	SE1	DE1
Lactose reduced	TL1	CL1	PL1	EL1	ML1	SL1	DL1
Lactose red 1# cheese	TL2	CL2	PL2	NA	ML2	SL2	DL2
Soy	TS1	CS1	PS1	ES1	MS1	SS1	DS1
Pregnant with Multiples	NA	NA	PFM	NA	NA	NA	NA
Breastfeeding Multiples	NA	NA	NA	EFM	MFM	NA	NA
Some BF with Infant > 6 months (no checks pkg)	NA	NA	NA	NA	NA	SNC	NA

Nebraska WIC Contract Formula



Enfamil Premium



Phasing out

Enfamil LIPIL



Enfamil AR



Enfamil ProSobee (Soy)

*No Physician
Authorization
Needed*



Enfamil Gentlease

Physician authorization Required - Next Step Toddler Formulas:



*Enfagrow Premium
Toddler*



*Enfagrow Soy
Toddler*



*Enfagrow Gentlease
Toddler*

NOT PROVIDED: Standard milk or soy based formulas from other companies such as Similac, Nestles, Parent's Choice etc.

Contract Infant Formulas

IFF = Formula Fed Infants

Enfamil Premium



0 - 3 mo.

Powder
- 9 cans; 1AF

Concentrate
- 31 cans; 1BF

4-5 mo.

Powder
- 10 cans; 2AF

Concentrate
- 34 cans; 2BF

6-12 mo.

Powder
- 7 cans; 3AF

Concentrate
- 24 cans; 3BF

Infant Cereal - (3) 8 oz boxes
Baby Food F/V - (32) 4 oz jars

Enfamil ProSobee



0 - 3 mo.

Powder
- 9 cans; 1HF

Concentrate -
31 cans; 1IF

4-5 mo.

Powder
- 10 cans; 2HF

Concentrate
- 34 cans; 2IF

6-12 mo.

Powder
- 7 cans; 3HF

Concentrate
- 24 cans; 3IF

Infant Cereal - (3) 8 oz boxes
Baby Food F/V - (32) 4 oz jars

Enfamil Gentlease



0 - 3 mo.

Powder
- 10 cans; 1GF

4-5 mo.

Powder
- 11 cans; 2GF

6-12 mo.

Powder
- 8 cans; 3GF

Infant Cereal (3) 8 oz boxes
Baby Food F/V - (32) 4 oz jars

Enfamil AR



0 - 3 mo.

Powder
- 9 cans; 1KF

4-5 mo.

Powder
- 10 cans; 2KF

6-12 mo.

Powder
- 7 cans; 3KF

Infant Cereal - (3) 8 oz boxes
Baby Food F/V - (32) 4 oz jars

Formulas in Food Package Order (Revised 04/2010)

Infant Formulas For Infant 0 - 12 Months of age		Food Pkg 3 Infant Formulas Child 12 mo or older		For	Food Pkg 3 Childrens Products For Child 12 mo or older	
ENFAMIL Premium Powd 12.9oz	A	ENFAMIL Premium Powd 12.9oz	A		ENFAGROW Premium NextStep Powd 24oz	A
ENFAMIL Premium Conc 13oz	B	ENFAMIL Premium Conc 13oz	B		ENFAGROW Soy NextStep Powd 24oz	B
ENFAMIL Premium RTF 32oz	C	ENFAMIL Premium RTF 32oz	C		ENFAGROW Gentlease NextStep Powd 24oz	C
ENFAMIL Gentlease Powd 12oz	G	ENFAMIL Gentlease Powd 12oz	G		BOOST Kid Essentials w/ Probiotic Straw 8.25oz	D
Prosobee Powd 12.9oz	H	Prosobee Powd 12.9oz	H		BOOST Kid Essentials w/ or w/o Fiber 8oz	E
Prosobee Conc 13oz	I	Prosobee Conc 13oz	I		EO28 SPLASH 8oz Tetra pack	F
Prosobee RTF 32oz	J	Prosobee RTF 32oz	J		ELECARE Vanilla Powder 14.1oz	G
ENFAMIL AR Powd 12.9oz	K	ENFAMIL AR Powd 12.9oz	K		NEOCATE ONE+ Powd 2.1oz	I
ENFAMIL AR RTF 32oz	L	ENFAMIL AR RTF 32oz	L		NEOCATE Junior Powd 14oz	J
SIMILAC Alimentum Powd 16oz	O	SIMILAC Alimentum Powd 16oz	O		NUTREN Jr w/ Fiber RTF 8.45oz	K
SIMILAC Alimentum RTF 32oz	P	SIMILAC Alimentum RTF 32oz	P		NUTREN Jr RTF 8.45oz	L
NUTRAMIGEN Lipil Enflora Powder 12.6oz	Q	NUTRAMIGEN Lipil Enflora Powd 12.6oz	Q		PEDIASURE RTF 8oz	M
NUTRAMIGEN Lipil Conc 13OZ	R	NUTRAMIGEN LIPIL Conc 13oz	R		PEDIASURE w/ Fiber RTF 8oz	N
NUTRAMIGEN Lipil RTF 32oz	S	NUTRAMIGEN Lipil RTF 32oz	S		PEDIASURE Enteral RTF 8oz	O
PREGESTIMIL Lipil Powd 16oz	T	PREGESTIMIL Lipil Powd 16oz	T		VIVONEX Pediatric Powd 1.7oz	P
ELECARE w/ or w/o DHA/ARA Powd 14.1oz	U	ELECARE w/ or w/o DHA/ARA Powd 14.1oz	U		PEPTAMEN Jr RTF 250ml	Q
NEOCATE Infant w/ or w/o DHA/ARA Powd 14oz	V	NEOCATE Infant w/ or w/o DHA/ARA Powd 14oz	V		PEPTAMEN Jr w/Fiber RTF 250ml	R
NUTRAMIGEN AA Lipil Powd 14.1oz	W	NUTRAMIGEN AA Lipil Powd 14.1oz	W		PEPTAMEN Jr 1.5, 250ml	S
ENFACARE Lipil Powd 12.8oz	X	SIMILAC Neosure Powd 12.8 oz	Y		VIVONEX TEN Powd 2.84oz	T
SIMILAC Neosure Powd 12.8 oz	Y	ENFACARE Lipil Powd 12.8oz	Z		PORTAGEN Powd 16oz	U
SIMILAC Neosure RTF 32oz	Z	RCF ROSS Carbohydrate Free Conc 13oz	4		PULMOCARE RTF 8oz	V
RCF ROSS Carbohydrate Free Conc 13oz	4	SIMILAC PM 60/40 Powd 14.1oz	5		VITAL Jr RTF any flavor 8oz	W
SIMILAC PM 60/40 Powd 14.1oz	5				PEPTAMEN Jr w/Prebio 250ml	X
SIMILAC Human Milk Fortifier	7					
ENFAMIL Human Milk Fortifier	8					

Infants Formula Fed - IFF

Foods provided: 6-12 months Old



Infant Cereal - 3 (8oz) Boxes



















Baby Food - fruit/vegetable puree
32 (4oz) Jars

Infant Food Package Numbers		FORMULA Feeding			
		IFF	IFF	IFF	IFF
Formula # Cans	2nd Digit ↓	IFF 0-3 mo	IFF 4-5 mo	IFF 6-11 mo	6-11 mo Formula ONLY
1st Digit →		100	200	300	300
ENFAMIL LIPIL Powder 12.9oz	A	1AF 1A1 9	2AF 2A1 10	3AF 3A1 7	FAF No food 7
ENFAMIL LIPIL CONC 13oz	B	1BF 1B1 31	2BF 2B1 34	3BF 3B1 24	FBF No food 24
ENFAMIL LIPIL RTF 32oz	C	1CF 1C1 26	2CF 2C1 28	3CF 3C1 20	FCF No food 20
ENFAMIL GENTLEASE Powder 12oz	G	1GF 1G1 10	2GF 2G1 11	3GF 3G1 8	FGF No food 8
Prosobee/ ENFAMIL SOY LIPIL Powder 12.9oz	H	1HF 1H1 9	2HF 2H1 10	3HF 3H1 7	FHF No food 7
Prosobee/ ENFAMIL SOY LIPIL CONC 13oz	I	1IF 31	2IF 34	3IF 24	FIF No food 24
Prosobee/ ENFAMIL SOY LIPIL RTF 32oz	J	1JF 26	2JF 28	3JF 20	FJF No food 20
ENFAMIL AR LIPIL Powder 12.9oz	K	1KF 1K1 9	2KF 2K1 10	3KF 3K1 7	FKF No food 7
ENFAMIL AR LIPIL RTF 32oz	L	1LF 26	2LF 28	3LF 20	FLF No food 20
SIMILAC ALIMENTUM Powder 16oz	O	1OF 1O1 7	2OF 2O1 8	3OF 3O1 6	FOF No food 6
SIMILAC ALIMENTUM RTF 32oz	P	1PF 26	2PF 28	3PF 20	FPF No food 20
NUTRAMIGEN LIPIL ENFLORA Powder 12.6 oz	Q	1QF 1Q1 10	2QF 2Q1 11	3QF 3Q1 8	FQF No food 8

Infant Food Package Numbers		FORMULA Feeding			
		IFF	IFF	IFF	IFF
Formula # Cans	2nd Digit ↓	IFF 0-3 mo	IFF 4-5 mo	IFF 6-11 mo	6-11 mo Formula ONLY
1st Digit →		100	200	300	300
NUTRAMIGEN LIPIL CONC 13oz	R	1RF 31	2RF 34	3RF 24	FRF No food 24
NUTRAMIGEN LIPIL RTF 32oz	S	1SF 26	2SF 28	3SF 20	FSF No food 20
PREGESTIMIL LIPIL Powder 16oz	T	1TF 1T1 7	2TF 2T1 8	3TF 3T1 6	FTF No food 6
ELECARE with or without DHA-ARA Powder 14.1oz	U	1UF 1U1 9	2UF 2U1 10	3UF 3U1 7	FUF No food 7
NEOCATE with or without DHA-ARA Powder 14oz	V	1VF 1V1 10	2VF 2V1 11	3VF 3V1 8	FVF No food 8
NUTRAMIGEN AA LIPIL Powder 14.1oz	W	1WF 1W1 9	2WF 2W1 9	3WF 3W1 7	FWF No food 7
ENFACARE LIPIL Powder 12.8oz	X	1XF 1X1 10	2XF 2X1 11	3XF 3X1 8	FXF No food 8
SIMILAC NEOSURE Powder 12.8oz	Y	1YF 1Y1 10	2YF 2Y1 11	3YF 3Y1 8	FYF No food 8
SIMILAC NEOSURE RTF 32oz	Z	1ZF 26	2ZF 28	3ZF 20	FZF No food 20
RCF ROSS CARBOHYDRATE FREE CONC 13oz	4	14F	24F	34F	F4F
SIMILAC PM 60/40 POWDER 14.1oz	5	15F	25F	35F	F5F
ENFAMIL HUMAN MILK FORTIFIER	8	NA	NA	NA	NA
* State Approval Required *					

Food Packages For Breastfeeding Mothers

	Fully Breastfeeding	Mostly Breastfeeding	Some Breastfeeding
Cheese		NONE	NONE
Canned salmon or tuna		NONE	NONE
Whole Grain Bread or Brown Rice			NONE
Eggs			
Beans & Peanut Butter			
Juice			
Milk			
Cereal			
Fruit & Vegetables	 \$10	 \$10	 \$10
Duration	Up to <u>1 year</u> postpartum	Up to <u>1 year</u> postpartum	Up to <u>6 months</u> postpartum

Food Packages for Breastfed Babies – 6 Months Old

	Fully Breastfeeding	Mostly Breastfeeding	Some Breastfeeding
	Only Mother's Breastmilk	Mother's Breastmilk & minimal formula	Mother's Breastmilk & formula
Baby Food (fruit & vegetable)	64 – 4 oz. jars	32 – 4 oz. jars	32 – 4 oz. jars
Baby Food (meat)	31 – 2.5 oz. jars	NONE	NONE
Baby Cereal	3 – 8oz. boxes	3 – 8 oz. boxes	3 – 8 oz. boxes



Effective 2-1-10
F/V check for all women increase to \$10

Infant Food Package Numbers		SOME Breastfeeding			
		IPB	IPB	IPB	IPB
Formula # Cans	2nd Digit ↓	IPB 0-3 mo	IPB 4-5 mo	IPB 6-11 mo	6-11 mo Formula ONLY
1st Digit →		400	500	600	600
ENFAMIL LIPIL Powder 12.9oz	A	4AF 4A8 to 4A1 9	5AF 5A9 to 5A6 10	6AF 6A6 to 6A5 7	6AT No food 7
ENFAMIL LIPIL CONC 13oz	B	4BF 4B1 31	5BF 5B1 34	6BF 6B1 24	6BT No food 24
ENFAMIL LIPIL RTF 32oz	C	4CF 4C1 26	5CF 5C1 28	6CF 6C1 20	6CT No food 20
ENFAMIL GENTLEASE Powder 12oz	G	4GF 4G9 to 4G1 10	5GF 5G9 to 5G7 11	6GF 6G7 to 6G5 8	6GT No food 8
Prosobee/ ENFAMIL SOY LIPIL Powder 12.9oz	H	4HF 4H8 to 4H1 9	5HF 5H9 to 5H6 10	6HF 6H6 6H5 7	6HT No food 7
Prosobee/ ENFAMIL SOY LIPIL CONC 13oz	I	4IF 31	5IF 34	6IF 24	6IT No food 24
Prosobee/ ENFAMIL SOY LIPIL RTF 32oz	J	4JF 26	5JF 28	6JF 20	6JT No food 20
ENFAMIL AR LIPIL Powder 12.9oz	K	4KF 4K8 to 4K1 9	5KF 5K9 to 5K6 10	6KF 6K6 to 6K5 7	6KT No food 7
ENFAMIL AR LIPIL RTF 32oz	L	4LF 26	5LF 28	6LF 20	6LT No food 20
SIMILAC ALIMENTUM Powder 16oz	O	4OF 4O1 7	5OF 5O1 8	6OF 6O1 6	6OT No food 6
SIMILAC ALIMENTUM RTF 32oz	P	4PF 26	5PF 28	6PF 20	6PT No food 20
NUTRAMIGEN LIPIL ENFLORA Powder 12.6 oz	Q	4QF 4Q1 10	5QF 5Q1 11	6QF 6Q1 8	6QT No food 8

Infant Food Package Numbers		SOME Breastfeeding			
		IPB	IPB	IPB	IPB
Formula # Cans	2nd Digit ↓ 1st Digit →	IPB 0-3 mo	IPB 4-5 mo	IPB 6-11 mo	6-11 mo Formula ONLY
		400	500	600	600
NUTRAMIGEN LIPIL CONC 13oz	R	4RF 31	5RF 34	6RF 24	6RT No food 24
NUTRAMIGEN LIPIL RTF 32oz	S	4SF 26	5SF 28	6SF 20	6ST No food 20
PREGESTIMIL LIPIL Powder 16oz	T	4TF 4T1 7	5TF 5T1 8	6TF 6T1 6	6TT No food 6
ELECARE with or without DHA-ARA Powder 14.1oz	U	4UF 4U1 9	5UF 5U1 10	6UF 6U1 7	6UT No food 7
NEOCATE with or without DHA-ARA Powder 14oz	V	4VF 4V1 10	5VF 5V1 11	6VF 6V1 8	6VT No food 8
NUTRAMIGEN AA LIPIL Powder 14.1oz	W	4WF 4W1 9	5WF 5W1 9	6WF 6W1 7	6WT No food 7
ENFACARE LIPIL Powder 12.8oz	X	4XF 4X1 10	5XF 5X1 11	6XF 6X1 8	6XT No food 8
SIMILAC NEOSURE Powder 12.8oz	Y	4YF 4Y1 10	5YF 5Y1 11	6YF 6Y1 8	6YT No food 8
SIMILAC NEOSURE RTF 32oz	Z	4ZF 26	5ZF 28	6ZF 20	6ZT No food 20
RCF ROSS CARBOHYDRATE FREE CONC 13oz	4	44F	54F	64F	64T
SIMILAC PM 60/40 POWDER 14.1oz	5	45F	55F	65F	65T
ENFAMIL HUMAN MILK FORTIFIER	8	48F * State Approval Required *	NA	NA	NA

Infant Food Package Numbers		MOSTLY Breastfeeding			
		IBF	IBF	IBF	IBF
Formula # Cans	2nd Digit ↓	IBF 1-3 mo	IBF 4-5 mo	IBF 6-11 mo	6-11 mo Formula ONLY
1st Digit →		700	800	900	900
ENFAMIL LIPIL Powder 12.9oz	A	7AF 7A3 to 7A1 4	8AF 8A4 to 8A1 5	9AF 9A3 to 9A1 4	9AT No food 4
ENFAMIL LIPIL CONC 13oz	B	7BF 7B6, 7B3 14	8BF 8B7, 8B4 17	9BF 9B6, 9B3 12	9BT No food 12
ENFAMIL LIPIL RTF 32oz	C	7CF 7C1 12	8CF 8C1 14	9CF 9C1 10	9CT No food 10
ENFAMIL GENTLEASE Powder 12oz	G	7GF 7G4 to 7G1 5	8GF 8G5 to 8G1 6	9GF 9G3 to 9G1 4	9GT No food 4
Prosobee/ ENFAMIL SOY LIPIL Powder 12.9oz	H	7HF 7H3 to 7H1 4	8HF 8H4 to 8H1 5	9HF 9H3 to 9H1 4	9HT No food 4
Prosobee/ ENFAMIL SOY LIPIL CONC 13oz	I	7IF 14	8IF 17	9IF 12	9IT No food 12
Prosobee/ ENFAMIL SOY LIPIL RTF 32oz	J	7JF 12	8JF 14	9JF 10	9JT No food 10
ENFAMIL AR LIPIL Powder 12.9oz	K	7KF 7K3 to 7K1 4	8KF 8K4 to 8K1 5	9KF 9K3 to 9K1 4	9KT No food 4
ENFAMIL AR LIPIL RTF 32oz	L	7LF 12	8LF 14	9LF 10	9LT No food 10
SIMILAC ALIMENTUM Powder 16oz	O	7OF 7O1 3	8OF 8O1 4	9OF 9O1 3	9OT No food 3
SIMILAC ALIMENTUM RTF 32oz	P	NA	NA	NA	NA
NUTRAMIGEN LIPIL ENFLORA Powder 12.6 oz	Q	7QF 7Q1 5	8QF 8Q1 6	9QF 9Q1 4	9QT No food 4

Infant Food Package Numbers		MOSTLY Breastfeeding			
		IBF	IBF	IBF	IBF
Formula # Cans	2nd Digit ↓	IBF 1-3 mo	IBF 4-5 mo	IBF 6-11 mo	6-11 mo Formula ONLY
1st Digit →		700	800	900	900
NUTRAMIGEN LIPIL CONC 13oz	R	7RF 14	8RF 17	9RF 12	9RT No food 12
NUTRAMIGEN LIPIL RTF 32oz	S	NA	NA	NA	NA
PREGESTIMIL LIPIL Powder 16oz	T	7TF 7T1 3	8TF 8T1 4	9TF 9T1 3	9TT No food 3
ELECARE with or without DHA- ARA Powder 14.1oz	U	7UF 7U1 4	8UF 8U1 5	9UF 9U1 4	9UT No food 4
NEOCATE with or without DHA- ARA Powder 14oz	V	7VF 7V1 5	8VF 8V1 6	9VF 9V1 4	9VT No food 4
NUTRAMIGEN AA LIPIL Powder 14.1oz	W	7WF 7W1 4	8WF 8W1 5	9WF 9W1 4	9WT No food 4
ENFACARE LIPIL Powder 12.8oz	X	7XF 7X1 5	8XF 8X1 6	9XF 9X1 4	9XT No food 4
SIMILAC NEOSURE Powder 12.8oz	Y	7YF 7Y1 5	8YF 8Y1 6	9YF 9Y1 4	9YT No food 4
SIMILAC NEOSURE RTF 32oz	Z	NA	NA	NA	NA
RCF ROSS CARBOHYDRATE FREE CONC 13oz	4	NA	NA	NA	94T
SIMILAC PM 60/40 POWDER 14.1oz	5	NA	NA	NA	95T
ENFAMIL HUMAN MILK FORTIFIER	8	78F	NA	NA	NA
* State Approval Required *		* Approval Required *			

Mom-Baby Pairs – Description of Food Packages	Age of Infant				
	Each month	Birth through date turns 1 month old	1 month of age through 3 months	4 through 5 months	6 through 12 months
Fully Breastfeeding <ul style="list-style-type: none"> Infant is fed breastmilk for all feedings Infant does not receive WIC formula 	BF1 Mom gets	Fully Breastfeeding food package (EF1)			
	IBF Baby gets	Mom's breastmilk No Formula (BFG)	Mom's breastmilk No Formula (BFG)	Mom's breastmilk No Formula (BF4)	Mom's Breastmilk Plus: 3 – 8 oz boxes infant cereal 64 – 4 oz jars baby food fruits & vegetables 31 – 2.5 oz jars baby food meat (BFF)
Mostly Breastfeeding <ul style="list-style-type: none"> Infant is fed breastmilk for nearly all feedings 	BF1 Mom gets	Fully Breastfeeding food package (EF1)	Mostly Breastfeeding food package (MF1)		
	IBF Baby gets	Mom's breastmilk (BFG)	Mom's breastmilk + up to 4 cans Enfamil Lipil Powder	Mom's breastmilk + up to 5 cans Enfamil Lipil Powder	Mom's breastmilk + up to 4 cans of Enfamil Lipil 3 – 8 oz boxes infant cereal 32 – 4 oz jars baby food fruits & vegetables
Some Breastfeeding <ul style="list-style-type: none"> Infant is fed breastmilk at least 1 time per day 	BF2 Mom gets	Some Breastfeeding food package (SF1)			No Foods Receives BF support & Nutrition Ed (SNC)
	IPB Baby gets	Mom's breastmilk + up to 9 cans Enfamil Lipil powder (4A3)	Mom's breastmilk + 5-9 cans Enfamil Lipil powder (4AF)	Mom's breastmilk + 6-10 cans Enfamil Lipil powder (5AF)	Mom's breastmilk + 5 – 7 cans Enfamil Lipil 3 – 8 oz boxes infant cereal 32 – 4 oz jars baby food fruits & vegetables (6AF)
Postpartum – Formula Feeding <ul style="list-style-type: none"> Infant is fed formula for all feedings 	PPW Mom gets	Postpartum food package (DF1)			Categorically ineligible – no food package
	IFF Baby gets	9 cans Enfamil Lipil powder (1AF)		10 cans Enfamil Lipil powder (2AF)	7 cans Enfamil Lipil powder 3 – 8 oz boxes infant cereal 32 – 4 oz jars baby food fruits & vegetables (3AF)

Changing Client's Status During A Certification Period

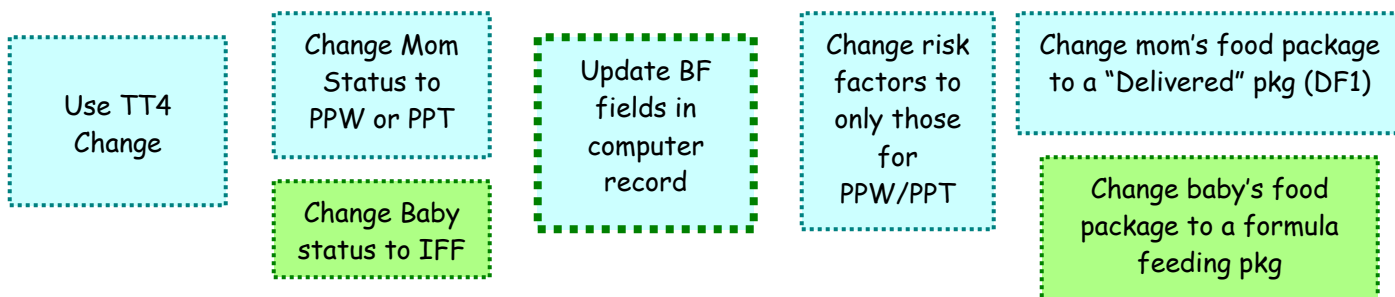
Situations Requiring Re-Certification Prior To Status Change:

- Breastfeeding woman or teen who becomes pregnant.
- Postpartum woman or teen who becomes pregnant.

Situations Where Status Can Be Changed During A Certification Period Without Recertification:

- Fully Breastfeeding, Mostly Breastfeeding or Some Breastfeeding **woman** less than six months postpartum who completely stops breastfeeding and changes to Postpartum Woman/Teen.
- Fully Breastfeeding, Mostly Breastfeeding or Some Breastfeeding **infant** who completely stops breastfeeding and changes to Formula Fed.
- Fully Breastfeeding woman and infant change to Mostly Breastfeeding
- Mostly Breastfeeding woman and infant change to Some Breastfeeding
- Some Breastfeeding woman and infant change to Mostly Breastfeeding

A BF1 or BF2 mother who stops breastfeeding and IBF or IBP infant who stops breastfeeding:



A Fully or Mostly Breastfeeding mother whose infant is breastfeeding less and getting more formula Need to change both Mother and Baby to "Some Breastfeeding" Status



A Fully Breastfeeding Mother whose infant is starting to use a minimal amount of formula. Need to change both Mother and Baby to "Mostly Breastfeeding" Status



A Some Breastfeeding Mother whose infant is breastfeeding more and getting less formula Need to change both Mother and Baby to "Mostly Breastfeeding" Status



Formula Tailoring Cheat Sheet

When to use a tailored formula package?

A tailored package should be used in situations where only a couple of cans of formula are needed:

- **Adjusting schedules** - to catch up a new baby with the rest of the family so they may have the same pick-up schedule
- **Formula Change** – in the middle of a benefit month

Tailoring Packages Available

Tailoring packages will be available for “powdered” infant formulas:

- Each tailoring package consists of “1 check” with “1 can of formula”
- Print as many checks as needed ie. 3 checks for 3 cans needed

POWDERED	IFF –Formula Tailoring Packages:	0-3 mo	4-5 mo	6-11 mo	Last Digit = 1 Can
	Enfamil Lipil (12.9 oz)	1A1	2A1	3A1	
	Enfamil Gentlease (12 oz)	1G1	2G1	3G1	
	Prosobee/Enfamil Soy Lipil (12.9 oz)	1H1	2H1	3H1	
	Enfamil AR Lipil (12.9 oz)	1K1	2K1	3K1	
	Similac Alimentum (16 oz)	1O1	2O1	3O1	
	Nutramigen Lipil Enflora (12.6)	1Q1	2Q1	3Q1	
	Pregestimil Lipil (16 oz)	1T1	2T1	3T1	
	Elecare/Elecare DHA/ARA (14.1 oz)	1U1	2U1	3U1	
	Neocate Infant/ Neocate DHA-ARA (14 oz)	1V1	2V1	3V1	
	Nutramigen AA Lipil (14.1 oz)	1W1	2W1	3W1	
	Enfacare Lipil (12.8 oz)	1X1	2X1	3X1	

Other Options: In some cases, it may be easier to use the full formula package (and pick out individual checks to print) that include the amount of formula needed. In that case, you would mark “whole package – NO” and print the individual check that you need. That is OK.

NOT AN OPTION – Changing Status (ie. IFF to IBF) to get a different amount of formula.

STATUS		CHILDS FOOD PACKAGE 3 - Infant Products Food Pkg Numbers				
		CH1	CH1	NA	CH1	CH1
		CH2	NA	CH2	CH2	CH2
		CH3	NA	CH3	CH3	CH3
Formula # Cans	2nd Digit	FORMULA ONLY (NO FOOD)	PLUS FOOD (Whole Milk)	PLUS FOOD (Reduced-fat Dairy)	Plus Food but NO DAIRY	Tailoring
1st Digit →		Y_F	Y_1	Y_2	Y_N	Y_T
ENFAMIL LIPIL Powder 12.9oz	A	YAF no food 9	YA1	YA2	YAN	YAT
ENFAMIL LIPIL CONC 13oz	B	YBF no food 35	YB1	YB2	YBN	YBT
ENFAMIL LIPIL RTF 32oz	C	YCF no food 28	YC1	YC2	YCN	YCT
ENFAMIL GENTLEASE POWDER 12oz	G	YGF no food 10	YG1	YG2	YGN	YGT
Prosobee/ ENFAMIL SOY LIPIL Powder 12.9oz	H	YHF no food 9	YH1	YH2	YHN	YHT
Prosobee/ ENFAMIL SOY LIPIL CONC 13oz	I	YIF no food 35	YI1	YI2	YIN	YIT
Prosobee/ ENFAMIL SOY LIPIL RTF 32oz	J	YJF no food 28	YJ1	YJ2	YJN	YJT
ENFAMIL AR LIPIL Powder 12.9oz	K	YKF no food 9	YK1	YK2	YKN	YKT
ENFAMIL AR LIPIL RTF 32oz	L	YLF no food 28	YL1	YL2	YLN	YLT
SIMILAC ALIMENTUM Powder 16oz	O	YOF no food 7	YO1	YO2	YON	YOT
SIMILAC ALIMENTUM RTF 32oz	P	YPF no food 28	YP1	YP2	YPN	YPT
NUTRAMIGEN LIPIL ENFLORA Powder 12.6oz	Q	YQF no food 10	YQ1	YQ2	YQN	YQT

STATUS		CHILDS FOOD PACKAGE 3 - Infant Products Food Pkg Numbers				
		CH1	CH1	NA	CH1	CH1
		CH2	NA	CH2	CH2	CH2
		CH3	NA	CH3	CH3	CH3
Formula # Cans	2nd Digit ↕	FORMULA ONLY (NO FOOD)	PLUS FOOD (Whole Milk)	PLUS FOOD (Reduced-fat Dairy)	Plus Food but NO DAIRY	Tailoring
1st Digit →		Y_F	Y_1	Y_2	Y_N	Y_T
NUTRAMIGEN LIPIL CONC 13oz	R	YRF no food 35	YR1	YR2	YRN	YRT
NUTRAMIGEN LIPIL RTF 32oz	S	YSF no food 28	YS1	YS2	YSN	YST
PREGESTIMIL LIPIL Powder 16oz	T	YTF no food 8	YT1	YT2	YTN	YTT
ELECARE with or without DHA-ARA Powder 14.1oz	U	YUF no food 9	YU1	YU2	YUN	YUT
NEOCATE with or without DHA-ARA Powder 14oz	V	YVF no food 10	YV1	YV2	YVN	YVT
NUTRAMIGEN AA LIPIL Powder 14.1oz	W	YWF no food 9	YW1	YW2	YWN	YWT
RCF ROSS CARBOHYDRATE FREE CONC 13oz	4	Y4F no food 35	NA	NA	NA	Y4T
SIMILAC PM 60/40 Powder 14.1oz	5	Y5F no food 8	NA	NA	NA	Y5T

STATUS		CHILDS FOOD PACKAGE 3 - Childrens Products Food Pkg Numbers				
		CH1	CH1	NA	CH1	CH1
		CH2	NA	CH2	CH2	CH2
		CH3	NA	CH3	CH3	CH3
Formula #cans	2nd Digit ↕	FORMULA ONLY (NO FOOD)	PLUS FOOD (Whole Milk)	PLUS FOOD (Reduced-fat Dairy)	PLUS FOOD but NO DAIRY	Tailoring
1st Digit →		Z_F	Z_1	Z_2	Z_N	Z_T
ENFAGROW PREMIUM NEXTSTEP Powder 24oz	A	ZAF no food 5	ZA1	ZA2	ZAN	ZAT
ENFAGROW SOY (Nextstep) Powder 24oz	B	ZBF no food 5	ZB1	ZB2	ZBN	ZBT
BOOST KID ESSENTIALS w/ PROBIOTIC STRAW 8.25oz	D	ZDF no food 113	ZD1	ZD2	ZDN	ZDT
EO28 SPLASH 8oz Tetra pack	F	ZFF no food 113	ZF1	ZF2	ZFN	ZFT
ELECARE VANILLA Powder 14.1oz	G	ZGF no food 14	ZG1	ZG2	ZGN	ZGT
NEOCATE ONE+ Powder 2.1oz	I	ZIF no food 113	ZI1	ZI2	ZIN	ZIT
NEOCATE JUNIOR Powder 14oz	J	ZJF no food 15	ZJ1	ZJ2	ZJN	ZJT
NUTREN JR WITH FIBER RTF 8.45oz	K	ZKF no food 107	ZK1	ZK2	ZKN	ZKT
NUTREN JR RTF 8.45oz	L	ZLF no food 107	ZL1	ZL2	ZLN	ZLT
PEDIASURE RTF 8oz	M	ZMF no food 113	ZM1	ZM2	ZMN	ZMT

STATUS		CHILDS FOOD PACKAGE 3 - Childrens Products Food Pkg Numbers				
		CH1	CH1	NA	CH1	CH1
		CH2	NA	CH2	CH2	CH2
		CH3	NA	CH3	CH3	CH3
Formula #cans	2nd Digit →	FORMULA ONLY (NO FOOD)	PLUS FOOD (Whole Milk)	PLUS FOOD (Reduced-fat Dairy)	PLUS FOOD but NO DAIRY	Tailoring
1st Digit →		Z_F	Z_1	Z_2	Z_N	Z_T
PEDIASURE WITH FIBER RTF 8oz	N	ZNF no food 113	ZN1	ZN2	ZNN	ZNT
PEDIASURE ENTERAL RTF 8oz	O	ZOF no food 113	NA	NA	NA	ZOT
VIVONEX PEDIATRIC Powder 1.7oz	P	ZPF no food 107	NA	NA	NA	ZPT
PEPTAMEN JR RTF 250ml	Q	ZQF no food 107	ZQ1	ZQ2	ZQN	ZQT
PEPTAMEN JR WITH FIBER RTF 250ml	R	ZRF no food 107	ZR1	ZR2	ZRN	ZRT
PEPTAMEN JR 1.5 250ml	S	ZSF no food 107	ZS1	ZS2	ZSN	ZST
PORTAGEN Powder 16oz	U	ZUF no food 13	ZU1	ZU2	ZUN	ZUT
PULMOCARE RTF 8oz	V	ZVF no food 113	ZV1	ZV2	ZVN	ZVT

PEDIASURE (READY TO FEED) – Tailored Package

GLINK - Wicdev

File Edit Settings Line Transfers

PAGE 1 OF 1

FOOD PACKAGE CHART

GROUPING SP

Women & Children with Special Diets

SUBGROUPING CS

Child 2-4 years old

PEDIASURE READY TO FEED 8 OZ

X ZMT 18 6pks-Max Tailored Formula & Food

PEDIASURE READY TO FEED 8 OZ

- ZMN 18 6pks Formula, Food, No Dairy

PEDIASURE READY TO FEED 8 OZ

- ZM1 18 6 pks Formula & Food-Toddler

PEDIASURE READY TO FEED 8 OZ

- ZM2 18 6pks Formula & Food-Child

PEDIASURE READY TO FEED 8 OZ

- ZMF 18 6-packs Formula Only

FI SEQ

TYPE EFFECTIVE TERMINATION F.I. TYPE DESCRIPTION

DATE DATE QTY UNIT

DIA 1 09/04/09 12/31/25 3 6PK PediaSure Ready To Feed 8 oz

JUC 2 09/04/09 12/31/25

CER 3 09/04/09 12/31/25

PEB 4 09/04/09 12/31/25

EGG 5 09/04/09 12/31/25

WHM 6 09/04/09 12/31/25

LFM 7 09/04/09 12/31/25

F06 8 09/04/09 12/31/25

ZMT – Tailored Package
Includes Formula & Food

Max Formula Amount –
18 (6 packs)

CH2 & CH3

DIA 1: 3 - 6PK PediaSure Ready To Feed 8 oz

PRINT Formula Check – 6 X
To receive max amount

Only 1 formula check is listed. The DIA formula check includes only 3 – 6pks of PediaSure. Need to print this check 6 times to receive a total of 18 (6 pks).

JUC 2: 2 BOT 64 oz Juice

PRINT ONCE = MAX Amt

CER 3: 36 OZ (OR LESS) Cereal
16 OZ Whole Wheat Brd OR 14-16 oz Brown Rice
16 OZ Whole Wheat Brd OR 14-16 oz Brown Rice

PRINT ONCE = MAX Amt

PEB 4: 1 18OZ Peanut Btr OR Beans-4 Cans OR 1 lb Dry

PRINT ONCE = MAX Amt

EGG 5: 1 DOZ Medium OR Large Eggs

PRINT ONCE = MAX Amt

WHM 6: 2 GAL Whole Milk

PRINT TWICE = MAX Amt for CH2 & CH3 is 4 gallons; only Issued WITH PAF for special formula AND whole milk

or

LFM 7: 2 GAL 2%, 1%, AND/OR Skim Milk
(only for CH2 or > NOT for CH1)

PRINT TWICE = MAX Amt for CH2 & CH3 is 4 gallons; (STANDARD Milk Check)

F06 8 : Fresh Fruits AND/OR Fresh Vegetables
Maximum Amount \$6.00

PRINT ONCE = MAX Amt

Nutren JR (Ready To Feed)

PAGE 1 OF 1		FOOD PACKAGE CHART			
GROUPING	SP	<u>Women & Children with Special Diets</u>			
SUBGROUPING	CS	<u>Child 2-4 years old</u>			
NUTREN JR W /FIBER RTF	8.45 OZ	-	ZKN	Food Package III Tailored No Dairy	
NUTREN JUNIOR RTF	8.45 OZ	-	ZLF	107 Cans Formula Only	
NUTREN JUNIOR RTF	8.45 OZ	-	ZL2	107 Cans Formula & Food - Child	
NUTREN JUNIOR RTF	8.45 OZ	-	ZLN	107 Cans Formula, Food, No Dairy	
NUTREN JUNIOR RTF	8.45 OZ	X	ZLT	107 Can-Max Tailored Formula & Food	
FI	SEQ				
TYPE	EFFECTIVE	TERMINATION	F.I. TYPE DESCRIPTION		
	DATE	DATE	QTY	UNIT	
NUT	1 09/13/09	12/31/25	24	CAN	Nutren Junior Ready To Feed 8.45 oz
REN	2 09/13/09	12/31/25			
JUC	3 09/13/09	12/31/25			
CER	4 09/13/09	12/31/25			
PEB	5 09/13/09	12/31/25			
EGG	6 09/13/09	12/31/25			
WHM	7 09/13/09	12/31/25			
LFM	8 09/13/09	12/31/25			
F06	9 09/13/09	12/31/25			

**ZLT – Tailored Package
Includes Formula & Food**

**Max Formula Amount –
107 cans**

CH2 & CH3

If need max amount of formula:

NUT 1: 24 CAN Nutren Junior Ready To Feed 8.45 oz

Print 4 X = (96 cans)

REN 2: 11 CAN Nutren Junior Ready To Feed 8.45 oz

Print 1 X = (11cans)

= 107
cans
max

JUC 3: 2 BOT 64 oz Juice

PRINT ONCE = MAX Amt for child

CER 4: 36 OZ (OR LESS) Cereal
16 OZ Whole Wheat Brd OR 14-16 oz Brown Rice
16 OZ Whole Wheat Brd OR 14-16 oz Brown Rice

PRINT ONCE = MAX Amt for child

PEB 5: 1 18OZ Peanut Btr OR Beans-4 Cans OR 1 lb Dry

PRINT ONCE = MAX Amt for child

EGG 6: 1 DOZ Medium OR Large Eggs

PRINT ONCE = MAX Amt for child

WHM 7: 2 GAL Whole Milk

**PRINT TWICE = MAX Amt for CH2 &
CH3 is 4 gallons; only Issued WITH
PAF for special formula AND whole
milk**

OR

LFM 8: 2 GAL 2%, 1%, AND/OR Skim Milk
(only for CH2 or > NOT for CH1)

**PRINT TWICE = MAX Amt for CH2&
CH3 is 4 gallons; (STANDARD Milk
Check)**

F06 9 : Fresh Fruits AND/OR Fresh Vegetables
Maximum Amount \$6.00

PRINT ONCE = MAX Amt

Tailored - Food & Formula

FORMULA	Tailored Pkg CH1	Formula Max Amount	Amount formula on each check	If need max amount, print....
Enfacare Lipil Powder 12.8 oz	YZT - Food & Form	11 cans	FAB -- 5 cans BAB -- 6 cans	FAB – print 1 x BAB – print 1 x

FORMULA	Tailored Pkg Child 2-4	Formula Max Amount	Amount formula on each check	If need max amount, print....
Viovenex TEN Powder 2.84 oz	ZTT – Food & form.	90 Packets	Nex – 30 pkt Nex – 30 pkt	NEX – print 1x NEX – print 2x
Pediasure (RTF) 6 pack (8oz)	ZMT – Food & form.	18 (6 pks)	DIA – 3(6pks)	DIA – print 6x
Nutrin Jr (RTF) 8.45 oz	ZLT – Food & form.	107 cans	NUT – 24 can REN – 11 can	NUT – print 4x REN– print 1x

FOODS	Tailored Pkgs for Children	Food Max Amount	Amount Food on each check	
Juice	JUC	2 - 64 oz bottles	Same	JUC – print 1x
Cereal Bread or Rice	CER	36 oz cereal & 2 – 16 oz bread or 2 – 14-16 oz br rice	Same	CER – print 1x
Peanut butter or Beans or Dry Beans	PEB	1 – 18 oz PB or 4 cans – Beans or 1 lb – Dry Beans	Same	PEB – print 1x
Eggs	EGG	1 Dz eggs	Same	EGG – print 1x
Fresh Fruit & Veg	F06	\$6 amount F/V	Same	F06 – print 1x
Whole Milk or 2%, 1%, Skim	WHM or LFM	4 gallons or 4 gallons	2 gallons or 2 gallons	WHM – print 2x or LFM – print 2x